# Rec'd CT/PTO 19 JUN 2001 09/000004

#### **Application Data Sheet**

#### **Application Information**

Application Type::

regular

Subject Matter::

utility

Suggested Classification:: Suggested Group Art Unit::

CD-ROM or CD-R?::

none

Title::

Analysis of Alpha Integrins for the

Diagnosis of Diabetic Nephropathy

Request early publication?::

no

Request non-publicaiton?::

no

Suggested Drawing figure::

1 1

Total drawing sheets:: Small Entity::

yes

Petition included?::

no

Secrecy Order in Parent Appl.?:: no

#### **Applicant Information**

Applicant Authority type::

inventor

Primary citizenship country::

US -

Status::

full capacity

Given Name::

Photini-Effie

Family Name::

Tsilibary

City of Residence::

Minneapolis

State or Province of Residence:: MN

Country of Residence::

US

Street of mailing address::

1025 29th Avenue South

City of mailing address::

Minneapolis

State or Province of mailing address::

MN

Postal or Zip Code of mailing address::

55414

Applicant Authority type:: inventor

Primary citizenship country:: US

Status:: full capacity
Given Name:: Aristidis S.
Family Name:: Charonis
City of Residence:: Minneapolis

State or Province of Residence:: MN Country of Residence:: US

Street of mailing address:: 1025 29th Avenue South

City of mailing address:: Minneapolis

State or Province of mailing address:: MN
Postal or Zip Code of mailing address:: 55414

Applicant Authority type:: inventor Primary citizenship country:: India

Status:: full capacity

Given Name:: Suman Family Name:: Setty

City of Residence:: Minneapolis

State or Province of Residence:: MN Country of Residence:: US

Street of mailing address:: 425 15th Avenue SE Apt.1105

City of mailing address:: Minneapolis

State or Province of mailing address:: MN
Postal or Zip Code of mailing address:: 55414

Applicant Authority type:: inventor Primary citizenship country:: US

Status:: full capacity
Given Name:: Michael
Family Name:: Mauer
City of Residence:: Minneapolis

State or Province of Residence:: MN Country of Residence:: US

Street of mailing address:: 2507 West 52nd Street

City of mailing address:: Minneapolis

State or Province of mailing address:: MN
Postal or Zip Code of mailing address:: 55401

# **Correspondence Information**

Correspondence Customer Number:: 23552

## Representative Information

Representative Customer Number::	23552
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### **Domestic Priority Information**

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
09/000,004	national stage of	PCT/US96/12067	07/19/1996
PCT/US96/12067	non provisional	60/001,387	07/21/1995
PCT/US96/12067	non provisional	60/001,861	08/01/1995

# Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

#### **Assignee Information**

Assignee Name:: Regents fo the University of Minnesota